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LETTERS TO THE EDITOR



[*The Editor is not responsible for opinions expressed in this Department.*]

May 12th, 1902.

MISS PALMER.

One Month ago I wrote an article to the A. J. for publication—shortly after I received a letter from you stating the article had been Condensed some—lack of space Necessitated it, the article has never been published—kindly return the Manuscript to me for which I enclose a stamp—the meeting in Albany a short time ago served to Convince me that the JOURNAL is Controlled by a body of Narrow minded women that dare not publish the Opinion of its subscribers.

Respectfully

J. CURR.

[Will this lady kindly send her address to the Editor, who will take pleasure in returning the manuscript.]

FOND DU LAC, WIS., May 7.

DEAR EDITOR: Will you kindly publish in your JOURNAL answers to the following questions: What is the modern treatment of small-pox? What methods are used to prevent scarring? Is there any treatment that will hasten the disappearance of the red spots? In caring for a case of small-pox, what especial symptoms must the nurse observe?

I am a subscriber to THE AMERICAN JOURNAL OF NURSING, and am *delighted* with the many helpful things it contains.

E. V.

[Will some of our readers who have nursed small-pox cases reply to these questions?—ED.]

DEAR EDITOR: Many people imagine because a nurse receives twenty-five dollars a week as remuneration for her services she should amass a fortune, but do not stop to consider the necessary outlay. To succeed in her profession a nurse must live well,—that is to say, within the bounds of propriety. As to the average expenditure for clothing, it is impossible to make an estimate, as tastes differ. I believe that nurses should dress *plainly*, but *well*. The buying of cheap material is not economy.

Few nurses are employed more than two-thirds of the year, and during the remaining third expenses must be met just the same, so there is considerable outlay without any income. I have found among friends in the profession that private nurses invariably have some burden to share, family or otherwise, and find plenty of use for all they can spare from their earnings. I have done private nursing in several small Western towns as well as large cities, and find the average amount after expenses are paid is about equal. For instance, in one town private nurses receive fifteen dollars a week and find suitable rooms and board for three and a half or four dollars. In large cities, where the salary is twenty-five dollars, the same expenses amount to six and a half or seven dollars. Whatever the salary and the expenditure, I consider it the duty of each nurse to lay by a certain amount of her income for future use. Have a definite object in view. It seems to me from my personal experience that an

average of five dollars a week can be easily managed. At best a nurse's active career is short, and surely during *that* active period we should look forward to and prepare for "the rainy day."

D. M. A.

DEAR EDITOR: My New-Yorkish feelings have been somewhat wounded by your recent editorial on our conditions here, and I am moved to advocate our cause for a moment. You forget our size when you talk about us. One general club or county society is all very well in nice little towns like Boston, Philadelphia, and Rochester, but you will find they could never be a success in Chicago or New York. They would be lost. You will find that only a small proportion (comparatively) of the medical profession here belong to the County Society, and one general nursing society could simply never cover the ground. If it were formed, the nurses who would join it would be those already interested in organization and who already belong to their *alumnæ* or a club, who would join it to "help along." I do not quite see the point of the same nurses organizing *twice over* in local groups in the same place. In New York those of us who talk over these things hope some day (not so far off, either) to have an *affiliation* of all the groups in Greater New York. This would not be a new and competing society, but a definite means of union and intercourse for all our nurses' associations in New York and Brooklyn, Staten Island, and Harlem. It would leave all the individual groups as strong as they are now, whereas a large general society would tend rather to weaken them without ever being able to take the place they now hold with the nurses. We in New York want to encourage *all* nurses to enter *some* group which will be to them what the family is to the individual. We encourage all we can to enter the Metropolitan Club. We want our graduates to join their *alumnæ*. And, for all and every nurse, both from schools here and elsewhere, who will enter, there has been formed lately a general society for Manhattan and Bronx, the aim of which is to gather in those who are now unorganized. Then later we hope to gather all these "family" groups into an affiliation, which will be, for social and professional purposes, the equivalent of the County Society, and to my mind better, for there will not be the duplication of fees and membership that now exists when a nurse joins both *alumnæ* and County Society. We may, in the future, get to the point of sending all our State Society delegates through this affiliation, but this is only a conjecture. And I will whisper to you that steps are being taken for a clubhouse or private hotel for nurses which shall be general in its character.

I will also hint to you that we are offered a tempting plan for next winter's lectures from the Berkeley Lyceum, where the League for Political Education meets. I will not tell you any more about that now, except that it will give us many club advantages, and that we are hoping to get all nurses in the town interested.

Yours sincerely,

A RESIDENT OF NEW YORK.

DEAR EDITOR: If not too late, may I say a word about life insurance? In the December number of the magazine "A Graduated Nurse," in replying to Miss Knight's article in the October number, says, "A man had deposited fifty dollars and forty-seven cents a year for twenty years in a New York life insurance company, and at the end of the twenty years the company offered him in cash fifteen hundred and forty-eight dollars and thirty-five cents, which is a return of all money deposited with 37.8 per cent. compound interest." Now, I would like to

know how "Graduate Nurse" makes out that large per cent.? I have taken that sum (fifty dollars and forty-seven cents) and compounded it at four per cent. once a year only, and I make the amount at the end of the twenty years sixteen hundred and thirteen dollars and forty-three cents, being sixty-five dollars and eight cents more than the insurance company offered. Several of our New York savings-banks have given four per cent. and compounded it oftener than once a year. Now, if I am correct in my figures, savings-banks are better than "that life insurance company." I have not yet found a life insurance company that will do better by me than a savings-bank. I have had a policy in one good New York company paid up in ten years. When I came to settle with them they offered to pay me just what I had put in, with interest on that sum of less than two per cent. I said to them: "You promised me a good rate of interest. Is this what you call a good rate?" Their reply was: "That was a *verbal* promise. We expected to do better by you, but everything is so depressed now that we cannot afford to do so."

Another nurse whom I know holds a policy in another company (a good one). When she had paid her last premium they offered to settle by paying her *less* than she had put in, although she had it in writing, signed by the agent who insured her, that they would give her a better rate of interest than she could get in any savings-bank. When the paper was given her she showed it to the secretary of the company, and he said it was correct. The company said "they were not responsible for what their agents did, and that the secretary was dead." They finally settled the matter by paying her less than one per cent. on what she had paid in. And letting the policy stand for ten years, she gets yearly accrued interest—which this year amounted to two per cent. At the end of ten years she gets the full amount she was insured for.

A short time ago an agent from another company called on me. He acknowledged before we were through talking that I was right. It was *not* a good investment for a nurse to insure her life, if she was only doing it to make money.

Now, I consider there are some good points about a life insurance.

1. It makes a nurse more saving (and as a class I think we are inclined *not* to save); her premium has got to be paid, and she will save her money to do it.

2. It does seem to me that as soon as a nurse begins to earn her twenty dollars per week a "thousand and one" persons spring up who want to borrow a few dollars, and we are not strong-minded enough to say *No*. But she can say, "I have my premium to pay; am sorry I cannot help you," etc., if she has her life insured.

3. If we have near and dear ones that we are helping, and who in case of our death will be in want, then by all means have our lives insured in their favor.

In regard to business men insuring their lives: I have been told by several that it is not as an investment, as they themselves expect no return for their money, but they know if anything happens to themselves or their business that their families are provided for. One gentleman told me that if it had not been for a life insurance a family he knew would have had nothing to pay the doctor's or nurse's bills or to live on for a year while the estate was being settled up.

ANOTHER GRADUATED NURSE.

DEAR EDITOR: The nurse in the ward of a great hospital seldom realizes that for the time being she stands in the same relation to an incoming patient as the mistress in a home does to the arriving visitor, with this difference,—the visitor comes with anticipation of a pleasant time, but the patient too often

enters that unknown home, the hospital, with fear and anxiety thrilling her heart. Then how much it means if the nurse comes to her with a cordial greeting, or in some cases with warm, outstretched hand and words of sympathy.

The true relation of patient and nurse is of so intimate a character that a right start often saves friction in later intercourse.

I never shall forget the pleasant, kindly words with which I was greeted by the superintendent of the hospital which I was entering as a maternity patient. It was a hot summer night, and I was entering "on my feet." Her gracious greeting, her assurance of comfort and coolness in the maternity end of the building, cheered my sinking heart and sent me to the ministering hands of a friendly nurse with renewed courage for the ordeal before me. I always look back on the weeks spent in the maternity ward as one of the unique and happy times of my life. Of course, there were some disagreeable things to put up with, but I hardly think I should have been exempt from all discomfort even in an expensive private room or my own home. In the ward was this advantage, we were like one family, and the interest in and the little helps given to one another did much to dispel the conventional gloom of the sick-chamber and to discourage the natural selfishness of sickness.

The cheery, industrious nurses had my heartfelt sympathy, for if there is one class of students more than another who gain their profession by the sweat of the brow, it is the nurses in a great hospital. All honor to them. I know little of the kind of homes from which they come, but it seemed to me, especially after I had been in a hospital a second time, that some of them, at least, would be better equipped for their work if they could acquire more of the little elegances of manner that help to make both social and domestic life run smoothly.

In going out to homes where for the time being she is to have—or ought to have—unlimited authority in the sick-room to carry out the physician's orders, a nurse would find that this graciousness of word and manner would gain her ends where the aggressive and dictatorial manner so often fails, the former bringing comfort and strength to the patient and delight to the household, while the latter stirs up strife and discord both upstairs and down.

I once had an amusing experience the lesson of which he who runs may read. I lived near a beautiful hospital that was the joy and fad—very rightly so—of certain wealthy people. My friends, one and all, knowing I had planned to go to a hospital for my "lying in," advised this beautiful retreat; so one bright afternoon, supposing, of course, in my ignorance, that I was an interesting object, at least to hospital authorities, and would be treated with the kindness and consideration I had been receiving for months from my family, friends, salespeople, and even conductors on the cars, I entered this fine building with beaming face. But, alas, I was left to stand before a desk while questioned as to my business. Whether I came seeking a twenty-five-dollar room or a ward bed was a point not reached when I exclaimed, "Please, please give me a chair," and when I had recovered breath faltered out that I thought I would make other arrangements, and took myself off home, leaving the aggressive woman behind the desk to conduct the hospital on so-called business lines; but I think if she were employed in a bank or any other large business office and should receive a customer with so little courtesy she would probably hear from the head of the firm in no uncertain tone. Some time after, in my best bib and tucker, I had the privilege of being taken through the same hospital by one of the lady managers. It is beautiful, the private rooms almost too luxurious, the wards

finished in the latest sanitary style. But I could not get away from the spirit that emanated from the office, for the office gives the keynote to the whole hospital, and without the spirit of love the most beautiful surroundings give but slight comfort to the tenant of the narrow white bed.

When I went to my own hospital, which is anything but luxurious, I was offered a rocking-chair before proceeding to business.

A WARD PATIENT.

DEAR EDITOR: Can I obtain two copies of the magazine for November, 1900?

MRS. M. S. LOVE,
67 Westland Avenue, Suite 3, Boston, Mass.

[Anyone having these numbers please communicate directly with Mrs. Love.—Ed.]

[LETTERS to the Editor must be accompanied by the name in full and address of the writer, otherwise such communications cannot be recognized. The name need not appear in the JOURNAL unless so desired.—Ed.]

